

Application Data Sheet

Application Information

Application number::	TBD
Filing Date::	December 15, 2003
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	TBD
Suggested Group Art::	TBD
CD-ROM or CD-R?::	
Number of CDs::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of Copies of CRF::	
Title::	HSC70 Directed Diagnostics and Therapeutics for Multidrug Resistant Neoplastic Disease
Attorney Docket Number::	112418-149 (AUR-011US)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	30
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Elias
Family Name:: Georges
City of Residence:: Laval
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 2095 De Vouvray
City of Mailing Address:: Laval
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H7M 3J7

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Lucille
Family Name:: Serfass
City of Residence:: Montreal
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 5291 de l'Esplanade
City of Mailing Address:: Montreal
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H2T 2Z6

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Anne-Marie
Family Name:: Bonneau
City of Residence:: Laval
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 2095 De Vouvray
City of Mailing Address:: Laval
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H7M 3J7

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Frédéric
Family Name:: Dallaire
City of Residence:: Montreal
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 4683 Mentana
City of Mailing Address:: Montreal
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H2J 3B7

Correspondence Information

Correspondence Customer Number:: 23483

Phone Number:: 617-526-6000

Fax Number:: 617-526-5000

E-Mail address:: james.olesen@haledorr.com

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Dat ::
This application	An application claiming the benefit under 35 USC 119(e)	60/438,012	January 3, 2003

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Aurelium BioPharma, Inc.